

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Friends of Matt Doheny Inc.

ADDRESS (number and street)

215 Washington Street

Check if different
than previously
reported. (ACC)

Watertown

NY

13601

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00560797

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NY

21

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
06 / 24 / 2014in the
State of

NY

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2014

through

M M / D D / Y Y Y Y
06 / 04 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jeffrey Kirkby

Signature of Treasurer

Jeffrey Kirkby

[Electronically Filed]

Date

M M / D D / Y Y Y Y
06 / 12 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 51

Write or Type Committee Name

Friends of Matt Doheny Inc.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	87721.18	379388.18
(b) Total Contribution Refunds (from Line 20(d))	2000.00	2000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	85721.18	377388.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	429897.10	455619.29
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	429897.10	455619.29
8. Cash on Hand at Close of Reporting Period (from Line 27).....	172268.89	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	250500.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Friends of Matt Doheny Inc.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

83814.18

365614.18

(ii) Unitemized.....

2907.00

9274.00

(iii) TOTAL of contributions from individuals ▶

86721.18

374888.18

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

1000.00

4500.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

87721.18

379388.18

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

250500.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

250500.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

87721.18

629888.18

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	429897.10	455619.29
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	2000.00	2000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2000.00	2000.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	431897.10	457619.29

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	516444.81
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	87721.18
25. SUBTOTAL (add Line 23 and Line 24).....	604165.99
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	431897.10
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	172268.89

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Lisa Beckerman

Mailing Address 80 Bloomfield Street

City

Hoboken

State

NJ

Zip Code

07030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Akin Gump Straus

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		13		2014

Transaction ID : SA11AI.4785

Amount of Each Receipt this Period

1000.00

Primary Contribution

Full Name (Last, First, Middle Initial)

B. John Bertrand

Mailing Address 43 North Drive

City

Manhasset

State

NY

Zip Code

11030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Morgan Stanley

Occupation

Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.4635

Amount of Each Receipt this Period

1000.00

Primary Contribution

Full Name (Last, First, Middle Initial)

C. Lee Robert Bogdanoff

Mailing Address 1614 Bryn Mawr Avenue

City

Santa Monica

State

CA

Zip Code

90405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Klee Tuchin Bogdanoff & Stern

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2014

Transaction ID : SA11AI.4892

Amount of Each Receipt this Period

1500.00

Primary Contributions

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Brent Buckley

Mailing Address 3503 Harvard Avenue

City

Dallas

State

TX

Zip Code

75205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Financial Analyst

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2014

Transaction ID : SA11AI.4916

Amount of Each Receipt this Period

2500.00

General Contribution

Full Name (Last, First, Middle Initial)

B. Elizabeth O Cole

Mailing Address 557 West Arlington Place

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4630

Amount of Each Receipt this Period

2600.00

Primary Contribution

Full Name (Last, First, Middle Initial)

C. Elizabeth O Cole

Mailing Address 557 West Arlington Place

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4632

Amount of Each Receipt this Period

2600.00

General Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7700.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

Michael P Cole

A.

Mailing Address 557 West Arlington Place

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maeva Group LLC

Occupation

Business Development

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4627

Amount of Each Receipt this Period

2600.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Michael P Cole

B.

Mailing Address 557 West Arlington Place

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maeva Group LLC

Occupation

Business Development

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		21		2014

Transaction ID : SA11AI.4629

Amount of Each Receipt this Period

2600.00

General Contribution

Full Name (Last, First, Middle Initial)

Howard Demick

C.

Mailing Address 66 south Main Street

City

Hammond

State

NY

Zip Code

13646

FEC ID number of contributing
federal political committee.

C

Name of Employer

YesterYear's Vintage Doors, LL

Occupation

Millwork

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		01		2014

Transaction ID : SA11AI.4926

Amount of Each Receipt this Period

1000.00

In-kind - Event Food

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

Rosemary Demick

A.

Mailing Address 66 south Main Street

City

Hammond

State

NY

Zip Code

13646

FEC ID number of contributing
federal political committee.

C

Name of Employer

YesterYear's Vintage Doors, LL

Occupation

Millwork

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 01 2014

Transaction ID : SA11AI.4928

Amount of Each Receipt this Period

1000.00

In-kind - Event food

Full Name (Last, First, Middle Initial)

Christopher Donoho

B.

Mailing Address 305 Centennial Circle

City

Wilimington

State

DE

Zip Code

19807

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hogan Lovells US LLP

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
05 20 2014

Transaction ID : SA11AI.4737

Amount of Each Receipt this Period

1000.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Scott I Eisner

C.

Mailing Address 18706 Hillsboro Road

City

Northridge

State

CA

Zip Code

91326

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

CPA

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 04 2014

Transaction ID : SA11AI.4956

Amount of Each Receipt this Period

1000.00

Primary Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

Michael J. Genereux

A.

Mailing Address 5552 - 1st Street

City

Brooklyn

State

NY

Zip Code

11215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blackstone Investments

Occupation

Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11AI.4747

Amount of Each Receipt this Period

1000.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Anthony Hall

B.

Mailing Address 492 Federal Hill Road

City

Bolton Landing

State

NY

Zip Code

12814

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake George Mirror

Occupation

Writer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 03 / 2014

Transaction ID : SA11AI.4611

Amount of Each Receipt this Period

100.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Stephen Hessler

C.

Mailing Address 510 Park Avenue

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kirkland & Ellis

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11AI.4948

Amount of Each Receipt this Period

1000.00

Primary Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 51
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial) Urban Hirschey			Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2014	
Mailing Address 181 Tibbets Place			Transaction ID : SA11AI.4807	
City	State	Zip Code	Amount of Each Receipt this Period _____ 1000.00	
Cape Vincent	NY	13618	Primary Contributions	
FEC ID number of contributing federal political committee.		C _____	Amount of Each Receipt this Period _____ 1000.00	
Name of Employer Town of Cape Vincent		Occupation Government	Primary Contributions	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) Philippe Jacob			Date of Receipt M M / D D / Y Y Y Y 05 / 22 / 2014	
Mailing Address 14 Split Tree Road			Transaction ID : SA11AI.4641	
City	State	Zip Code	Amount of Each Receipt this Period _____ 1000.00	
Scarsdale	NY	10583	Primary Contribution	
FEC ID number of contributing federal political committee.		C _____	Amount of Each Receipt this Period _____ 1000.00	
Name of Employer Credit Suisse		Occupation Financial Research	Primary Contribution	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) Tom P Jeremiassen			Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2014	
Mailing Address 5843 Ridgebrook Drive			Transaction ID : SA11AI.4954	
City	State	Zip Code	Amount of Each Receipt this Period _____ 1000.00	
Agoura Hills	CA	91301	Primary Contribution	
FEC ID number of contributing federal political committee.		C _____	Amount of Each Receipt this Period _____ 1000.00	
Name of Employer Berkley Research Group		Occupation Advanced Business Analytics	Primary Contribution	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 1000.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 3000.00
TOTAL This Period (last page this line number only).....	_____

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

Bradley Jordan

Mailing Address 18 Bryan Road

City

Norwalk

State

CT

Zip Code

06853

FEC ID number of contributing
federal political committee.

C

Name of Employer

Houlihan Lokey

Occupation

Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.4913

Amount of Each Receipt this Period

500.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Ross Kwasteniet

Mailing Address 300 North LaSalle Drive

City

Chicago

State

IL

Zip Code

60654

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kirkland & Ellis LLP

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.4633

Amount of Each Receipt this Period

1000.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Kenneth Maiman

Mailing Address 3 Erwin Park

City

Montclair

State

NJ

Zip Code

07042

FEC ID number of contributing
federal political committee.

C

Name of Employer

Appaloosa Management

Occupation

Investor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		15		2014

Transaction ID : SA11AI.4588

Amount of Each Receipt this Period

2600.00

Primary Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

Chris Marcus

A.

Mailing Address 32 South Road

City

Sands Point

State

NY

Zip Code

11050

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kirkland & Ellis

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 21 / 2014

Transaction ID : SA11AI.4938

Amount of Each Receipt this Period

500.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Dennis M Mastascusa

B.

Mailing Address 7466 NYS Route 12

City

Lowville

State

NY

Zip Code

13367

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Abstract

Occupation

Title Insurance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : SA11AI.4590

Amount of Each Receipt this Period

1000.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Robert O McNeil

C.

Mailing Address 10751 State Highway 37

City

Lisbon

State

NY

Zip Code

13658

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1964.18

Date of Receipt

M M / D D / Y Y Y Y
06 / 01 / 2014

Transaction ID : SA11AI.4910

Amount of Each Receipt this Period

1764.18

In-kind - Beverages/Tent/Tables/Chairs for Event

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3264.18

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

James A Mesterharm

Mailing Address 960 Eastwood Road

City

Glencoe

State

IL

Zip Code

60022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alix Partners

Occupation

Business Analyst

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		09		2014

Transaction ID : SA11AI.4786

Amount of Each Receipt this Period

1600.00

Primary Contribution

Full Name (Last, First, Middle Initial)

James A Mesterharm

Mailing Address 960 Eastwood Road

City

Glencoe

State

IL

Zip Code

60022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alix Partners

Occupation

Business Analyst

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		09		2014

Transaction ID : SA11AI.4825

Amount of Each Receipt this Period

400.00

General Contribution

Full Name (Last, First, Middle Initial)

Samuel L Molinaro

Mailing Address 413 Ponus Ridge Road

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information requested

Occupation

Information requested

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11AI.4946

Amount of Each Receipt this Period

2600.00

Primary Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

R. Todd Neilson

A.

Mailing Address 1251 E. Manfield Way

City

Draper

State

UT

Zip Code

84020

FEC ID number of contributing
federal political committee.

C

Name of Employer

Berkley Research Group

Occupation

Financial Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		04		2014

Transaction ID : SA11AI.4952

Amount of Each Receipt this Period

1000.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Jason G New

B.

Mailing Address 100 Park Avenue
Apt 4A

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blackstone

Occupation

Investor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		05		2014

Transaction ID : SA11AI.4600

Amount of Each Receipt this Period

2600.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Jason G New

C.

Mailing Address 100 Park Avenue
Apt 4A

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blackstone

Occupation

Investor

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		05		2014

Transaction ID : SA11AI.4602

Amount of Each Receipt this Period

2600.00

General Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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PAGE 15 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

Jennifer New

A.

Mailing Address 1100 Park Avenue

Apt 4A

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		05		2014

Transaction ID : SA11AI.4603

Amount of Each Receipt this Period

2600.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Jennifer New

B.

Mailing Address 1100 Park Avenue

Apt 4A

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		05		2014

Transaction ID : SA11AI.4605

Amount of Each Receipt this Period

2600.00

General Contribution

Full Name (Last, First, Middle Initial)

Craig Osborne

C.

Mailing Address 1801 Century Park

City

Los Angeles

State

CA

Zip Code

90067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Legal vision Consulting Group

Occupation

Data Management

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		17		2014

Transaction ID : SA11AI.4885

Amount of Each Receipt this Period

1000.00

Primary Contributions

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Doug Ostrover

Mailing Address 10 Broad Road

City

Greenwich

State

CT

Zip Code

06830

FEC ID number of contributing
federal political committee.

C

Name of Employer
GSO Capital PartnersOccupation
Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.4936

Amount of Each Receipt this Period

1000.00

Primary Contribution

Full Name (Last, First, Middle Initial)

B. Dana A Pachulski

Mailing Address 6505 Wilshire Blvd #100

City

Los Angelse

State

CA

Zip Code

90048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Zimmer Children's MuseumOccupation
Fundraiser

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.4742

Amount of Each Receipt this Period

2600.00

Primary Contribution

Full Name (Last, First, Middle Initial)

C. Dana A Pachulski

Mailing Address 6505 Wilshire Blvd #100

City

Los Angelse

State

CA

Zip Code

90048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Zimmer Children's MuseumOccupation
Fundraiser

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.4744

Amount of Each Receipt this Period

2600.00

General Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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PAGE 17 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

Richard M. Pachulski

A.

Mailing Address 10100 Santa Monica Blvd, Ste 1300

City

Los Angeles

State

CA

Zip Code

90067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pachulski, Stang, Ziehl & Jone

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		22		2014

Transaction ID : SA11AI.4739

Amount of Each Receipt this Period

2600.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Richard M. Pachulski

B.

Mailing Address 10100 Santa Monica Blvd, Ste 1300

City

Los Angeles

State

CA

Zip Code

90067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pachulski, Stang, Ziehl & Jone

Occupation

Attorney

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		22		2014

Transaction ID : SA11AI.4741

Amount of Each Receipt this Period

2600.00

General Contribution

Full Name (Last, First, Middle Initial)

Andrew M Reidy

C.

Mailing Address P. O. Box 722

City

Arlington

State

VA

Zip Code

22216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dickstein Shapiro

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		08		2014

Transaction ID : SA11AI.4606

Amount of Each Receipt this Period

2600.00

Primary Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7800.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 51

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

M. Freddie Reiss

Mailing Address 522 17th Street

City

Santa Monica

State

CA

Zip Code

90402

FEC ID number of contributing
federal political committee.

C

Name of Employer

FIT Consulting

Occupation

Business Advisory

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2014

Transaction ID : SA11AI.4950

Amount of Each Receipt this Period

1000.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Darren Richman

Mailing Address 35 Sparta Road

City

Short Hills

State

NJ

Zip Code

07078

FEC ID number of contributing
federal political committee.

C

Name of Employer

GSO Capital Partners

Occupation

Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.4942

Amount of Each Receipt this Period

1000.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Yosef J Riemer

Mailing Address 149 Soundview Ave

City

White Plains

State

NY

Zip Code

10606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kirkland & Ellis LLP

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Transaction ID : SA11AI.4752

Amount of Each Receipt this Period

1000.00

Primary Contribution

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

PAGE 19 OF 51

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

Becky Roof

Mailing Address 15 Pine Briar Circle

City

Houston

State

TX

Zip Code

77056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alix Partners

Occupation

Analyst

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11AI.4819

Amount of Each Receipt this Period

1000.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Edward O Sassower

Mailing Address 1112 Park Avenue

Apt. 12A

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kirland & Ellis

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11AI.4944

Amount of Each Receipt this Period

2000.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Joshua Scherer

Mailing Address 87th St.

Apt 3D

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greenhill Partners

Occupation

Analyst

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11AI.4903

Amount of Each Receipt this Period

1000.00

Primary Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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PAGE 20 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

Glenn E Siegel**A.**

Mailing Address 18 Elmwood Place

City

Short Hills

State

NJ

Zip Code

07078

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dechert LLP

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		15		2014

Transaction ID : SA11AI.4596

Amount of Each Receipt this Period

250.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Maynard Skarka Jr.**B.**

Mailing Address 9761 E Pine Valley Road

City

Scottsdale

State

AZ

Zip Code

85260

FEC ID number of contributing
federal political committee.

C

Name of Employer

YRC Transportation

Occupation

Transportation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		17		2014

Transaction ID : SA11AI.4888

Amount of Each Receipt this Period

2500.00

Primary Contributions

Full Name (Last, First, Middle Initial)

Kevin Smith**C.**

Mailing Address 153 Moffitt Beach Road

City

Lake Pleasant

State

NY

Zip Code

12108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frontier Communications

Occupation

Communications

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		30		2014

Transaction ID : SA11AI.4798

Amount of Each Receipt this Period

500.00

Primary Contributions

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 21 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

Lloyd Sprung

Mailing Address 55 E 52nd Street

City

New York

State

NY

Zip Code

10055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Evercore Partners

Occupation

Investment Banking

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.4637

Amount of Each Receipt this Period

1000.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Edward J Stenger Jr.

Mailing Address 450 Purchase St.

City

Rye

State

NY

Zip Code

10580

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alix Partners LLC

Occupation

Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SA11AI.4749

Amount of Each Receipt this Period

2500.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Robert R Sturtz

Mailing Address 204 Ten Eyck Street

City

Watertown

State

NY

Zip Code

13601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Transaction ID : SA11AI.4598

Amount of Each Receipt this Period

500.00

Primary Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

Matthew Williams

A.

Mailing Address 74 Cross Street

City

Little Silver

State

NJ

Zip Code

07739

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gibson Dunn & Crutcher

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		30		2014

Transaction ID : SA11AI.4805

Amount of Each Receipt this Period

500.00

Primary Contributions

Full Name (Last, First, Middle Initial)

Harry Wilson

B.

Mailing Address 7 Renaissance Square
3rd Floor

City

White Plains

State

NY

Zip Code

10601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maeva Group LLC

Occupation

Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		01		2014

Transaction ID : SA11AI.4917

Amount of Each Receipt this Period

2600.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Sean C Worker

C.

Mailing Address 623 Sout Ripple Creek Drive

City

Houston

State

TX

Zip Code

77057

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bridgestreet Global Hospitalit

Occupation

Hospitality

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		22		2014

Transaction ID : SA11AI.4639

Amount of Each Receipt this Period

2600.00

Primary Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5700.00

83814.18

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

Dr. J. Nathan Rubin

Mailing Address 4940 Van Nuys Blvd.

City

Sherman Oaks

State

CA

Zip Code

91403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Doctor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2014

Transaction ID : SA11C.4732

Amount of Each Receipt this Period

1000.00

Primary Contribution

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

SUNTRUST PAC

Mailing Address 919 E MAIN STREET

City

RICHMOND

State

VA

Zip Code

23219

FEC ID number of contributing
federal political committee.

C C00386524

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2014

Transaction ID : SA11C.4594

Amount of Each Receipt this Period

1000.00

Primary Contribution

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

1000.00

: 97 `A =G7 9 @C B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SA11C
Transaction ID : SA11C.4732

Dr. J. Nathan Rubin provided us with a signed letter stating that his contribution is made by check from my personal funds, is not drawn on an account maintained by an incorporated entity, and will not be reimbursed by another person or entity.

Form/Schedule:
Transaction ID:

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Andrew Theodore

Mailing Address P. O. Box 320412

City	State	Zip Code
Alexandria	VA	22320

Purpose of Disbursement
Campaign Finance

001

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4856

B. BusinessKeeping

Mailing Address 26 Valdepenas Lane

City	State	Zip Code
Clifton Park	NY	12065

Purpose of Disbursement
FEC filing services

001

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

2100.00

Transaction ID : SB17.4874

c. Candidate CommandMailing Address 401 First Street, SE
2nd Floor

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Media

003

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2014

Amount of Each Disbursement this Period

14884.00

Transaction ID : SB17.4679

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

17984.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Candidate CommandMailing Address 401 First Street, SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Media

003

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2014

Amount of Each Disbursement this Period

4211.00

Transaction ID : SB17.4677

B. Candidate CommandMailing Address 401 First Street, SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Media

003

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

Amount of Each Disbursement this Period

14884.00

Transaction ID : SB17.4675

C. Candidate CommandMailing Address 401 First Street, SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Media

003

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

38401.00

Transaction ID : SB17.4873

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

57496.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Candidate CommandMailing Address 401 First Street, SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Media

003

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2014

Amount of Each Disbursement this Period

14884.00

Transaction ID : SB17.4877

B. Candidate CommandMailing Address 401 First Street, SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Media

003

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2014

Amount of Each Disbursement this Period

26482.00

Transaction ID : SB17.4879

c. Coughlin Printing

Mailing Address 7602 North State Street

City Lowville State NY Zip Code 13367

Purpose of Disbursement
Printed Campaign Materials

006

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		11		2014

Amount of Each Disbursement this Period

1830.13

Transaction ID : SB17.4860

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

43196.13

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Delta

Mailing Address P. O. Box 20706

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

City	State	Zip Code
Atlanta	GA	30320

Amount of Each Disbursement this Period

563.00

Purpose of Disbursement
Flight

002

Transaction ID : SB17.4833

Candidate Name

Friends of Matt Doheny Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Full Name (Last, First, Middle Initial)

B. Howard Demick

Mailing Address 66 south Main Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2014

City	State	Zip Code
Hammond	NY	13646

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
In-kind - Event FoodCategory/
Type

Transaction ID : SB17.4927

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

c. Rosemary Demick

Mailing Address 66 south Main Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2014

City	State	Zip Code
Hammond	NY	13646

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
In-kind - Event foodCategory/
Type

Transaction ID : SB17.4929

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2563.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2014

City	State	Zip Code
Menlo Park	CA	94025

Purpose of Disbursement
Internet Advertising

004

Amount of Each Disbursement this Period

500.43

Transaction ID : SB17.4651

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2014

City	State	Zip Code
Menlo Park	CA	94025

Purpose of Disbursement
Internet Advertising

004

Amount of Each Disbursement this Period

101.30

Transaction ID : SB17.4653

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

City	State	Zip Code
Menlo Park	CA	94025

Purpose of Disbursement
Internet Advertising

004

Amount of Each Disbursement this Period

750.35

Transaction ID : SB17.4654

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1352.08

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

City	State	Zip Code
Menlo Park	CA	94025

Purpose of Disbursement
Internet Advertising

004

Amount of Each Disbursement this Period

729.54

Transaction ID : SB17.4835

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Full Name (Last, First, Middle Initial)

B. Hilton

Mailing Address 40 Lodge Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

City	State	Zip Code
Albany	NY	12207

Purpose of Disbursement
Meeting Room Expense

001

Amount of Each Disbursement this Period

263.52

Transaction ID : SB17.4659

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Full Name (Last, First, Middle Initial)

C. Hilton

Mailing Address 40 Lodge Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

City	State	Zip Code
Albany	NY	12207

Purpose of Disbursement
Meeting Room Expense

001

Amount of Each Disbursement this Period

309.64

Transaction ID : SB17.4827

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1302.70

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Honold Communications Inc.

Mailing Address 630 Browns Court, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Campaign Consulting

001

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

Amount of Each Disbursement this Period

2480.42

Transaction ID : SB17.4880

B. Jolly Good Promos

Mailing Address Route 3

City	State	Zip Code
Morrisonville	NY	12962

Purpose of Disbursement
Printed Campaign Materials

006

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

1767.87

Transaction ID : SB17.4875

c. Jolly Good Promos

Mailing Address Route 3

City	State	Zip Code
Morrisonville	NY	12962

Purpose of Disbursement
Advertising

006

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2014

Amount of Each Disbursement this Period

3667.79

Transaction ID : SB17.4839

SUBTOTAL of Disbursements This Page (optional).....

7916.08

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Joseph J. Ward

Mailing Address 54 School Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

City	State	Zip Code
Mayfield	NY	12117

Purpose of Disbursement
Field Rep - Payroll

001

Amount of Each Disbursement this Period

1381.10

Transaction ID : SB17.4882

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Full Name (Last, First, Middle Initial)

B. Key Bank

Mailing Address 200 Washington Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

City	State	Zip Code
Watertown	NY	13601

Purpose of Disbursement
Bank Wire Fee

004

Amount of Each Disbursement this Period

552.28

Transaction ID : SB17.4826

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Full Name (Last, First, Middle Initial)

c. MaryEllen B. Zebrowski

Mailing Address 23 Magnolia Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2014

City	State	Zip Code
Saratoga Springs	NY	12866

Purpose of Disbursement
Campaign Coordinator - Payroll

001

Amount of Each Disbursement this Period

3129.97

Transaction ID : SB17.4869

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5063.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Matt McDonald

Mailing Address 88 Nicole Drive

City	State	Zip Code
Queensbury	NY	12804

Purpose of Disbursement
Campaign Field Rep - Payroll

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

Amount of Each Disbursement this Period

2432.40

Transaction ID : SB17.4870

B. Robert O McNeil

Mailing Address 10751 State Highway 37

City	State	Zip Code
Lisbon	NY	13658

Purpose of Disbursement
In-kind - Beverages/Tent/Tables/Chairs for Event

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2014

Amount of Each Disbursement this Period

1764.18

Transaction ID : SB17.4911

C. Mentzer Media

Mailing Address 602 Fairmont Avenue

City	State	Zip Code
Towson	MD	21286

Purpose of Disbursement
Advertising

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		24		2014

Amount of Each Disbursement this Period

15000.00

Transaction ID : SB17.4683

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

19196.58

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Mentzer Media

Mailing Address 602 Fairmont Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2014

City	State	Zip Code
Towson	MD	21286

Amount of Each Disbursement this Period

15000.00

Purpose of Disbursement
Advertising

004

Transaction ID : SB17.4682

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Full Name (Last, First, Middle Initial)

B. Mentzer Media

Mailing Address 602 Fairmont Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		09		2014

City	State	Zip Code
Towson	MD	21286

Amount of Each Disbursement this Period

23420.00

Purpose of Disbursement
Advertising

004

Transaction ID : SB17.4680

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Full Name (Last, First, Middle Initial)

C. Mentzer Media

Mailing Address 602 Fairmont Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2014

City	State	Zip Code
Towson	MD	21286

Amount of Each Disbursement this Period

85640.00

Purpose of Disbursement
Advertising

004

Transaction ID : SB17.4841

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

124060.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Merchant Services - Key Bank

Mailing Address 200 Washington Street

City	State	Zip Code
Watertown	NY	13601

Purpose of Disbursement
Merchant Fees

001

Candidate Name

Friends of Matt Doheny Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

1955.06

Transaction ID : SB17.4645

B. Merchant Services - Key Bank

Mailing Address 200 Washington Street

City	State	Zip Code
Watertown	NY	13601

Purpose of Disbursement
Merchant Fees

001

Candidate Name

Friends of Matt Doheny Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

Amount of Each Disbursement this Period

29.95

Transaction ID : SB17.4650

C. New York State Tax DepartmentMailing Address Processing Unit
P.O. Box 4111

City	State	Zip Code
Binghamton	NY	13902

Purpose of Disbursement
2nd Qtr Payroll Taxes

001

Candidate Name

Friends of Matt Doheny Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

463.07

Transaction ID : SB17.4890

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2448.08

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.Mailing Address 144 2nd Street
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Merchant Fees

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

Amount of Each Disbursement this Period

172.50

Transaction ID : SB17.4894

B. Rebecca Smith

Mailing Address 312 South Allen Street

City Albany State NY Zip Code 12208

Purpose of Disbursement
Campaign Finance

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2014

Amount of Each Disbursement this Period

4759.24

Transaction ID : SB17.4878

C. Resonate Media & EntertainmentMailing Address 451 West End Avenue
Ste 2

City New York State NY Zip Code 10024

Purpose of Disbursement
Media

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

50000.00

Transaction ID : SB17.4871

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

54931.74

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Southwest

Mailing Address P. O. Box 36647-1CR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

City	State	Zip Code
Dallas	TX	75235

Amount of Each Disbursement this Period

584.00

Purpose of Disbursement
Flight

002

Transaction ID : SB17.4829

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Full Name (Last, First, Middle Initial)

B. Southwest

Mailing Address P. O. Box 36647-1CR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

City	State	Zip Code
Dallas	TX	75235

Amount of Each Disbursement this Period

214.00

Purpose of Disbursement
Flight

002

Transaction ID : SB17.4832

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Full Name (Last, First, Middle Initial)

c. The Casale Group

Mailing Address 125 Lake Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2014

City	State	Zip Code
Cooperstown	NY	13326

Amount of Each Disbursement this Period

8203.80

Purpose of Disbursement
Political Communications

001

Transaction ID : SB17.4864

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9001.80

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. The Casale Group

Mailing Address 125 Lake Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		23		2014

City	State	Zip Code
Cooperstown	NY	13326

Amount of Each Disbursement this Period

7893.00

Purpose of Disbursement
Political Communications

001

Transaction ID : SB17.4857

Candidate Name

Friends of Matt Doheny Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Full Name (Last, First, Middle Initial)

B. The Casale Group

Mailing Address 125 Lake Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

City	State	Zip Code
Cooperstown	NY	13326

Amount of Each Disbursement this Period

6500.00

Purpose of Disbursement
Political Communications

001

Transaction ID : SB17.4881

Candidate Name

Friends of Matt Doheny Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Full Name (Last, First, Middle Initial)

c. The Prosper Group

Mailing Address 203 S. Alfred Street, Floor 1

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

City	State	Zip Code
Alexandria	VA	22314

Amount of Each Disbursement this Period

5250.00

Purpose of Disbursement
Campaign Consulting

001

Transaction ID : SB17.4859

Candidate Name

Friends of Matt Doheny Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

19643.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. The Prosper Group

Mailing Address 203 S. Alfred Street, Floor 1

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
Media/Website Services

004

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2014

Amount of Each Disbursement this Period

2050.00

Transaction ID : SB17.4647

B. The Prosper Group

Mailing Address 203 S. Alfred Street, Floor 1

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
Media/Website Services

004

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2014

Amount of Each Disbursement this Period

3150.00

Transaction ID : SB17.4838

c. TrnasaxtMailing Address 190 Monroe Avenue NW
Ste. 500

City	State	Zip Code
Grand Rapids	MI	49503

Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

Amount of Each Disbursement this Period

585.00

Transaction ID : SB17.4619

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5785.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. TrnasaxtMailing Address 190 Monroe Avenue NW
Ste. 500City State Zip Code
Grand Rapids MI 49503Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		18		2014

Amount of Each Disbursement this Period

157.11

Transaction ID : SB17.4609**B. Trnasaxt**Mailing Address 190 Monroe Avenue NW
Ste. 500City State Zip Code
Grand Rapids MI 49503Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		09		2014

Amount of Each Disbursement this Period

23.72

Transaction ID : SB17.4608**c. Trnasaxt**Mailing Address 190 Monroe Avenue NW
Ste. 500City State Zip Code
Grand Rapids MI 49503Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2014

Amount of Each Disbursement this Period

58.04

Transaction ID : SB17.4797**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

238.87

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. TrnasaxtMailing Address 190 Monroe Avenue NW
Ste. 500City State Zip Code
Grand Rapids MI 49503Purpose of Disbursement
Merchant Fees

001

Candidate Name

Friends of Matt Doheny Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2014

Amount of Each Disbursement this Period

58.46

Transaction ID : SB17.4794

B. TrnasaxtMailing Address 190 Monroe Avenue NW
Ste. 500City State Zip Code
Grand Rapids MI 49503Purpose of Disbursement
Merchant Fees

001

Candidate Name

Friends of Matt Doheny Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

Amount of Each Disbursement this Period

396.00

Transaction ID : SB17.4773

c. TrnasaxtMailing Address 190 Monroe Avenue NW
Ste. 500City State Zip Code
Grand Rapids MI 49503Purpose of Disbursement
Merchant Fees

001

Candidate Name

Friends of Matt Doheny Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

103.24

Transaction ID : SB17.4815

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

557.70

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. TrnasaxtMailing Address 190 Monroe Avenue NW
Ste. 500City State Zip Code
Grand Rapids MI 49503Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

Amount of Each Disbursement this Period

2.02

Transaction ID : SB17.4816

B. Trombley Consulting

Mailing Address 43 Rainbow Drive

City State Zip Code
Diamon Point NY 12824Purpose of Disbursement
Political Campaign Strategy

001

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2014

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.4865

c. Trombley Consulting

Mailing Address 43 Rainbow Drive

City State Zip Code
Diamon Point NY 12824Purpose of Disbursement
Campaign Strategy

001

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

8000.00

Transaction ID : SB17.4876

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

12002.02

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Twitter

Mailing Address 1355 Market Street

City	State	Zip Code
San Francisco	CA	94103

Purpose of Disbursement
Internet Advertising

004

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2014

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.4667

B. Twitter

Mailing Address 1355 Market Street

City	State	Zip Code
San Francisco	CA	94103

Purpose of Disbursement
Internet Advertising

004

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2014

Amount of Each Disbursement this Period

118.87

Transaction ID : SB17.4668

C. Twitter

Mailing Address 1355 Market Street

City	State	Zip Code
San Francisco	CA	94103

Purpose of Disbursement
Internet Advertising

004

Candidate Name

Friends of Matt Doheny Inc.Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		09		2014

Amount of Each Disbursement this Period

130.36

Transaction ID : SB17.4666

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

269.23

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 51

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Twitter

Mailing Address 1355 Market Street

City	State	Zip Code
San Francisco	CA	94103

Purpose of Disbursement
Internet Advertising

004

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2014

Amount of Each Disbursement this Period

135.18

Transaction ID : SB17.4663

B. Twitter

Mailing Address 1355 Market Street

City	State	Zip Code
San Francisco	CA	94103

Purpose of Disbursement
Internet Advertising

004

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2014

Amount of Each Disbursement this Period

136.45

Transaction ID : SB17.4665

C. Twitter

Mailing Address 1355 Market Street

City	State	Zip Code
San Francisco	CA	94103

Purpose of Disbursement
Internet Advertising

004

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

97.62

Transaction ID : SB17.4828

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

369.25

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Verus Communications

Mailing Address 16th Street NW

City	State	Zip Code
Washington	DC	20010

Purpose of Disbursement
Campaign Consulting

001

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2014

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.4858

B. Voice Broadcasting

Mailing Address 1527 Sout Cooper Street

City	State	Zip Code
Arlington	TX	76010

Purpose of Disbursement
Telephone Messaging

003

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		07		2014

Amount of Each Disbursement this Period

1299.20

Transaction ID : SB17.4674

C. Voice Broadcasting

Mailing Address 1527 Sout Cooper Street

City	State	Zip Code
Arlington	TX	76010

Purpose of Disbursement
Telephone Messaging

003

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

Amount of Each Disbursement this Period

605.00

Transaction ID : SB17.4672

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6904.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Voice Broadcasting

Mailing Address 1527 Sout Cooper Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

City	State	Zip Code
Arlington	TX	76010

Purpose of Disbursement
Telephone Messaging

003

Category/
Type

Candidate Name

Friends of Matt Doheny Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 21

Amount of Each Disbursement this Period

1838.83

Transaction ID : SB17.4846

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

--

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1838.83

429368.97

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 51

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Matt Doheny Inc.

Full Name (Last, First, Middle Initial)

A. Robert J Stark

Mailing Address 516 9th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2014

City	State	Zip Code
Brooklyn	NY	11215

Purpose of Disbursement
Refund General Contribution

010

Amount of Each Disbursement this Period

400.00

Transaction ID : SB20A.4796

Candidate Name

Friends of Matt Doheny Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: NY District: 21

Full Name (Last, First, Middle Initial)

B. Robert J Stark

Mailing Address 516 9th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2014

City	State	Zip Code
Brooklyn	NY	11215

Purpose of Disbursement
Refund Primary Contribution

010

Amount of Each Disbursement this Period

1600.00

Transaction ID : SB20A.4930

Candidate Name

Friends of Matt Doheny Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 21

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

--

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

2000.00

SCHEDULE C (FEC Form 3)
LOANS

PAGE 50 OF 51

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4114

Friends of Matt Doheny Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

MATTHEW A. DOHENY

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

215 WASHINGTON STREET

City

State

ZIP Code

WATERTOWN

NY

13601

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
03 / 06 / 2014

Date Due

M M / D D / Y Y Y Y
12/31/14

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 51 OF 51

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4115

Friends of Matt Doheny Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

MATTHEW A. DOHENY

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

215 WASHINGTON STREET

City

State

ZIP Code

WATERTOWN

NY

13601

Original Amount of Loan

250000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250000.00

TERMS

Date Incurred

M / M / Y
03 / 31 / 2014

Date Due

M / M / Y
12 / 31 / 14

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

250000.00

TOTALS This Period (last page in this line only)..... ►

250500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.